Office of the United States Trustee

INSTRUCTIONS FOR PREPARATION OF DEBTOR'S CHAPTER 11 MONTHLY OPERATING REPORT

INDIVIDUAL AND INDIVIDUAL WITH A SOLE-PROPRIETORSHIP

Debtors-in-Possession and Trustees must file with the Bankruptcy Court, and serve on the United States Trustee, financial reports reflecting the activities of debtor(s) each month. While Local Rules or practice may vary regarding the filing of monthly operating reports, to the extent permissible, the required reports with attachments should be filed with the Bankruptcy Court and a complete copy of the report and all attachments, whether or not included with the report filed with the Bankruptcy Court, must be provided to the United States Trustee. These reports are to be submitted by the 20th of the month following the reporting period.

Individual debtors who are <u>not</u> either a) operating a business or b) managing rental property are only required to complete: (1) Summary of Cash Receipts and Cash Disbursements; (2) Schedule of Household Cash Receipts and Cash Disbursements; (3) Questionnaire/Insurance - Attachment 1; (4) Bank Account Reconciliation - Attachment 2; and (5) Cash Disbursements Detail-Attachment 3A.

Individual debtors operating a business, including the management of rental property, as a sole-proprietor must complete,: (1) Summary of Cash Receipts and Cash Disbursements; (2) Schedule of Household Cash Receipts and Cash Disbursements; (3) Schedule of Business Cash Receipts and Cash Disbursements; (4) Questionnaire /Insurance-Attachment 1; (5) Bank Account Reconciliation-Attachment 2; (6) Cash Disbursements Detail-Attachments 3A, 3B, and 3C; (6) Account Receivable/Tax Information - Attachment 4; and (7) Account/Note Payable Information - Attachment 5.

The following additional comments are provided to assist in the preparation of the forms provided by the United States Trustee.

- **CASH AT BEGINNING OF PERIOD.** For your first report this will be the amount of cash-on-hand and cash in all bank accounts at the time of filing (Listed on Schedule B). For subsequent reports, this should be the cash balance from the prior month's report.
- **SUMMARY OF CASH RECEIPTS AND CASH DISBURSEMENTS.** The amounts recorded on this Summary are obtained from the Schedule of *Household* Cash Receipts and Cash Disbursement Monthly Operating Report and Schedule of *Business* Cash Receipts and Cash Disbursement Monthly Operating Report. The **Total Disbursements** recorded on the Summary of Cash Receipts and Cash Disbursements is used to determine the quarterly fees due the United States Trustee.
- SCHEDULE OF HOUSEHOLD AND BUSINESS CASH RECEIPTS AND CASH DISBURSEMENTS. The amounts reported should be taken directly from the debtor's books and records, <u>not</u> from the bank statement. For your first report the beginning cash balance will be cash on hand at the time of filing (Listed on Schedule B). For subsequent reports, the beginning cash balance should be the ending cash balance from the prior month. The beginning cash for the Cumulative Total should always be the actual beginning cash from the first Monthly Operating Report. The schedules are self-explanatory and the debtor will categorize all receipts and disbursements for the month. The debtor will also provide a separate schedule of all "Other" receipts and disbursements.

- ► ATTACHMENT 1 QUESTIONNAIRE/INSURANCE INFORMATION. You must submit this information each month even if there have been no changes from the prior periods. If a new insurance policy is issued, coverage is changed, limits are changed, or if there is any other change in insurance coverage, a copy of the new certificate of insurance reflecting such changes must be attached.
- ► ATTACHMENT 2 BANK ACCOUNT RECONCILIATION. You must include each bank account, including savings accounts and negotiable instruments (e.g. certificates of deposit, money market accounts, stocks or bonds).
- ► ATTACHMENT 3 CHECK DISBURSEMENT DETAILS. A separate attachment must be utilized for each account. Itemize all checks written or wire transfers on each accounts. Debtors using computerized systems may submit computer-generated registers. The check disbursement details must account for ALL checks in sequential order, including those that have been voided. Additionally, the total amount recorded on the check disbursements detail <u>must</u> agree with the amounts recorded on either the Household or Business Schedule of Receipts and Disbursements.

Note: All disbursements must be made by pre-numbered check. Counter checks are prohibited. Cash disbursements by the business are prohibited. Requests to use, create or maintain petty cash accounts must be submitted to the United States Trustee in writing. Cash disbursements by the individuals must be kept to a minimum and the debtor must maintain supportive documentation (i.e., receipts) for such disbursements over \$100.00.

- ATTACHMENT 4 ACCOUNTS RECEIVABLE and POST-PETITION TAX INFORMATION. Debtors must show all accounts receivable requested on the attachment. Adjustments and writeoffs of any account receivable must be fully explained. Debtor must note all payroll tax deposits made during the period and attach copies of the payroll tax receipts.
- ► ATTACHMENT 5- ACCOUNTS PAYABLE and SECURED CREDITOR PAYMENT TAX INFORMATION. Debtors must show all outstanding bills or invoices that have been received, but not paid.
- The debtor must submit all attachments of the monthly operating report. Any attachments not applicable must be so noted on the attachment. The required reports with attachments should be stapled together and filed with the cover sheet listing the name, address and telephone number of debtor and debtor's attorney.

Failure to submit Monthly Operating Reports will seriously jeopardize your case, and may result in the dismissal or conversion of your case to a Chapter 7. If you have any questions regarding these reports which your attorney cannot answer, your attorney should contact the attorney or bankruptcy analyst in the United States Trustee's office who is assigned to your case.

UNITED STATES BANKRUPTCY COURT DISTRICT OF ____ **DIVISION** IN RE: **CASE NUMBER:** } } **JUDGE** DEBTOR. **CHAPTER 11** DEBTOR'S MONTHLY OPERATING REPORT (INDIVIDUAL) FOR THE PERIOD TO **FROM** Comes now the above-named debtor and files its Monthly Operating Report in accordance with the Guidelines established by the United States Trustee and FRBP 2015. Dated: Attorney for Debtor Debtor's Address Attorney's Address

Note: The original Monthly Operating Report is to be filed with the court and a copy simultaneously provided to the United States Trustee. Monthly Operating Reports must be filed by the 20th day of the following month.

and Phone Number:

Bar No. _____

Tel. ____

For assistance in preparing the Monthly Operating Report, refer to the following resources:

- 1) Instructions for Preparation Debtor's Chapter 11 Monthly Operating Report
- 2) Initial Filing Requirements
- 3) Frequently Asked Questions (FAQs)

and Phone Number:

SUMMARY OF CASH RECEIPTS AND CASH DISBURSEMENTS

		=
Case Name:		
Case Number:		
Note: The information requested below is a summary of the information reported the variety	ous Schedules and Attach	ments contained within this repo
	Month	Cumulative
		Total
		1000
CASH- Beginning of Month (Household)		
,		
CASH- Beginning of Month (Business)		
Total Household Receipts		
Total Household Receipts		
Total Business Receipts		
-		
Total Receipts		
Total Household Disbursements		
Total Business Disbursements		
Total Disbursements		
NET CASH FLOW (Total Receipts minus Total Disbursements)		
		<u> </u>
CASH- End of Month (Individual)		
CADA DIA DI PADIM (MATTAGAM)		
CASH- End of Month (Business)		
CALCULATION OF DISBURGEMENTS FOR UNITED STA		IADEDI VERRO
CALCULATION OF DISBURSEMENTS FOR UNITED STA	TES TRUSTEE QU	ARTERLY FEES
TOTAL DISBURSEMENTS (From Above)		
Less: Any Amounts Transferred or Paid from the Business Account to the		
Household Account (i.e., Salary Paid to Debtor or Owner's Draw)		
DISBURSEMENTS FOR U.S. TRUSTEE FEE CALCULATION		
I declare under penalty of perjury that this statement and the accompanying doc my knowledge and belief	uments and reports are	true and correct to the best of
•		
This day of 20	Debasis Circ	
	Debtor's Signature	

SCHEDULE OF HOUSEHOLD CASH RECEIPTS AND CASH DISBURSEMENTS

	Month	Cumulative
		Total
CASH - Beginning of Month		
CASH RECEIPTS		
Salary or Cash from Business		
Wages from Other Sources (attach list to this report)		
Interest or Dividend Income		
Alimony or Child Support		
Social Security/Pension/Retirement		
Sale of Household Assets (attach list to this report)		
Loans/Borrowing from Outside Sources (attach list to this report)		
Other (specify) (attach list to this report)		
TOTAL RECEIPTS		
CASH DISBURSEMENTS		
Alimony or Child Support Payments		
Charitable Contributions		
Gifts		
Household Expenses/Food/Clothing		
Household Repairs & Maintenance		
Insurance		
IRA Contribution		
Lease/Rent Payments		
Medical/Dental Payments		
Mortgage Payment(s)		
Other Secured Payments		
Taxes - Personal Property		
Taxes - Real Estate		
Taxes Other (attach schedule)		
Travel & Entertainment		
Tuition/Education		
Utilities (Electric, Gas, Water, Cable, Sanitation)		
Vehicle Expenses		
Vehicle Secured Payment(s)		
U. S. Trustee Quarterly Fees		
Professional Fees (Legal, Accounting)		
Other (attach schedule)		
Total Household Disbursements		
CASH - End of Month (Must equal reconciled bank statement-		
Attachment No. 2)		

SCHEDULE OF BUSINESS CASH RECEIPTS AND CASH DISBURSEMENTS

	Month	Cumulative
		Total
CASH - Beginning of Month		
BUSINESS CASH RECEIPTS		
Cash Sales		
Account Receivable Collection		
Loans/Borrowing from Outside Sources (attach list to this report)		
Rental Income		
Sale of Business Assets (attach list to this report)		
Other (specify) (attach list to this report)		
Total Business Receipts		
BUSINESS CASH DISBURSEMENTS		
Net Payroll (Excluding Self)		
Salary Paid to Debtor or Owner's Draw (e.g., transfer to Household Account)		
Taxes - Payroll		
Taxes - Sales		
Taxes Other (attach schedule)		
Contract Labor (Subcontractors)		
Inventory Purchases		
Secured/Lease Payments (Business)		
Utilities (Business)		
Insurance		
Vehicle Expenses		
Travel & Entertainment		
Repairs and Maintenance		
Supplies		
Charitable Contributions/Gifts		
Purchase of Fixed Assets		
Advertising		
Bank Charges		
Other (attach schedule)		
Total Business Disbursements		
CASH - End of Month (Must equal reconciled bank statement - Attachment No. 2)		

	QUESTIONNAIRE					
		YES*	NO			
1.	Have any assets been sold or transferred outside the normal course of business during this reporting period?					
2.	Have any funds been disbursed from any account other than a debtor in possession account?					
3.	Are any post-petition receivables (accounts, notes, or loans) due from any relatives, insiders, or related party?					
4.	Have any payments been made on pre-petition liabilities this reporting period?					
5.	Have any post-petition loans been received by the debtor from any party?					
6.	Are any post-petition payroll taxes past due?					
7.	Are any post-petition state or federal income taxes past due?					
8.	Are any post-petition state or local sales taxes past due?					
9.	Are any post-petition real estate taxes past due?					
10.	Are any amounts owed to post-petition creditors/vendors delinquent?					
11.	Are any wage payments past due?					

^{*}If the answer to any of the above questions is "YES," provide a detailed explanation of each item on a separate sheet.

	INSURANCE INFORMATION		
		YES	NO*
1.	Are real and personal property, vehicle/auto, general liability, fire, theft, worker's		
	compensation, and other necessary insurance coverages in effect?		
2.	Are all premium payments current?		

^{*}If the answer to any of the above questions is "NO," provide a detailed explanation of each item on a separate sheet.

CONFIRMATION OF INSURANCE					
TYPE of POLICY and	Period of Coverage	Payment Amount and Frequency	Delinquency Amount		

Check here if United States Trustee has been listed a a Certificate Holder on all policies of insurance.

DESCRIBE PERTINENT DEVELOPMENTS, EVENTS, AND MATTERS DURING THIS REPORTING PERIOD:
22,001,021,201,201,201,201,201,201,201,2
Estimated Date of Filing the Plan of Reorganization and Disclosure Statement:

BANK ACCOUNT RECONCILIATIONS

Bank Account Information	Account #1	Account #2	Account #3	Account #4
Name of Bank:				
Account Number:				
Purpose of Account (Business/Personal)				
Type of Account (e.g. checking)				
1. Balance per Bank Statement				
2. ADD : Deposits not credited (attach list to this report)				
3. SUBTRACT: Outstanding Checks (attach list)				
4. Other Reconciling Items (attach list to this report)				
5. Month End Balance (Must Agree with Books)				
TOTAL OF ALL ACCOUNTS				\$

Note: Attach a copy of the bank statement and bank reconciliation for each account.

Investment Account Information Bank / Account Name / Number	Date of Purchase	Type of Instrument	Purchase Price	Current Value

Note: Attach a copy of each investment account statement.

CASH DISBURSEMENTS DETAILS - HOUSEHOLD

Name of Bank	
Account Number	
Purpose of Account (Personal)	
Type of Account (e.g., Checking)	

Check	Date of			
Number	Check	Payee	Purpose or Description	Amount
				1
				1
				1
			TOTAL	¢
			IOTAL	\$

If any checks written this period have not been delivered to the payee, provide details, including the payee, amount, explanation for holding check and anticipated delivery date of check.

CASH DISBURSEMENTS DETAILS - BUSINESS

Name of Bank	
Account Number	
Purpose of Account (Business)	OPERATING
Type of Account (e.g., Checking)	

Check	Date of			
Number	Check	Payee	Purpose or Description	Amount
				1
				<u> </u>
				1
				1
				<u> </u>
			TOTAL	

If any checks written this period have not been delivered to the payee, provide details, including the payee, amount, explanation for holding check and anticipated delivery date of check.

CASH DISBURSEMENTS DETAILS - BUSINESS

Name of Bank	
Account Number	
Purpose of Account (Business)	
Type of Account (e.g., Checking)	

Check	Date of			
Number	Check	Payee	Purpose or Description	Amount
		j	•	
			TOTAL	Φ.
			TOTAL	\$

If any checks written this period have not been delivered to the payee, provide details, including the payee, amount, explanation for holding check and anticipated delivery date of check.

ACCOUNTS RECEIVABLE RECONCILIATION	Scheduled	Current Month
(Pre- & Post- Petition)	Amount	
Accounts Receivable Beginning Balance		
Plus: Billings During the Month		
Less: Collections During the Month		
Adjustments or WriteOffs*		
Accounts Receivable Ending Balance**		

ACCOUNTS RECEIVABLE AGING	Scheduled	Current Month
(Pre- & Post- Petition)	Amount	
0 - 30 Days		
31 - 60 Days		
61 - 90 Days		
Over 90 Days		
Total Accounts Receivable**		

^{*} Attach explanation of any adjustment or writeoff.

^{**} The "current month" of these two lines must equal.

POST-PETITION TAXES	Beginning Tax Liability*	Amount Withheld & or Accrued
Federal Taxes		
Withholding**		
FICA - Employee		
FICA - Employer		
Unemployment		
Income		
Other (Attach List)		
Total Federal Taxes		
State & Local Taxes		
Withholding		
Sales		
Unemployment		
Real Property		
Personal Property		
Other (Attach List)		
Total State & Local Taxes		
Total Post-Petition Taxes		

^{*} The beginning tax liability should represent the liability from the prior month, or if this is the first report, the amount should be zero

^{**} Attach copies of IRS Form 6123 or your FTD coupon and payment receipt to verify payment or deposit

ACCOUNTS PAYABLE RECO	NCILIATION (Post-Pe	tition Only)		
	Month Month Month			
Accounts Payable Beginning Balance*				
Plus: New Indebtedness During the Month				
Less: Amount Paid on Acct. Payables in Month				
Adjustments or WriteOffs**				
Accounts Payable Ending Balance				

^{*} The beginning A/P liability should represent the liability from the prior month, or if this is the first report, the amount should be zero

^{**}Attach explanation for any adjustment or write-off.

ACCOUNTS PAYABLE LISTING List all bills or invoices incurred since the filing of the petition (Post-Petition Only) and have NOT been paid]***				
Vendor & Description of Bill/Invoice	Date Days Incurred Outstanding		Amount	
<u> </u>				
		+		

^{***} List any additional payables on a separate sheet and attach to this schedule.

POST-PETITION STATUS OF SECURED NOTES, LEASES, AND ADEQUATE PROTECTION PAYMENTS					
Name of Secured Creditor / Lessor	Scheduled Monthly Payment Due	Total Past Due From Prior Month(s)	Amount Paid During Month	Total Unpaid Postpetition	Total Number of Payments Past Due